

## PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)

15897US01



In re the Application of

**Martin Morris**

Application Number

**09/524,326**

Filed

**March 13, 2000**

For

**Efficient Time-Division Multiplexed Addressing Protocol**

Group Art Unit

**2662**

Examiner

**Christopher M. Swickhamer**

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- |  |                  |
|--|------------------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))               | \$ _____         |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))              | \$ _____         |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$ <b>950.00</b> |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))             | \$ _____         |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))             | \$ _____         |

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the amount shown above is reduced by one-half, and the resulting fee is: \$ \_\_\_\_\_.

☒ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number **13-0017**. I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor

☐ assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number **44,636**

☐ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

**July 12, 2004**

Date

**312-775-8084**

Telephone Number

*Michael T. Cruz*  
Signature

**Michael T. Cruz, Reg. No. 44,636**

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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